PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

LOBBYIST REGISTRATION

L1

THIS SPACE FOR OFFICE USE

(360) 753-1111		🗕 '	
TOLL FREE 1-877-601-2828		(12/03)	
1. Lobbyist Name		Business Telephone Numbers	
		Permanent ()	
Permanent Business Address		Temporary ()	
		Cell Phone () or Pager	
City State	Zip	E-Mail Address	
	r		
Temporary Thurston County address during legislative session		Employer's occupation, business or description of	
		purpose of organization	
3. Employer's name and address (person or group for which you lobby)			
4. Name and address of person having custody of accounts, receipts, books or other	documents which substantiate	E-Mail Address	
lobbyist reports. (Person responsible for producing the annual L3 report)			
5. What is your pay (compensation) for lobbying?	Description of employment (check one	or more boxes	
\$ per	Full time employee	Sole duty is lobbying	
(hour, day, month, year)	Part time or temporary employee	☐ Lobbying is only a part	
Other: Explain:	Contractor, retainer or similar agre		
Are you reimbursed for lobbying expenses? Explain which expenses.	Unsalaried officer or member of group Does employer pay any of your lobbying expenses directly?		
Yes: \$ per	If yes, explain which ones.		
Yes: I am reimbursed for expenses.			
☐ No: I am not reimbursed for expenses.			
How long do you expect to lobby for this organization?			
☐ Permanent lobbyist ☐ Only during legislative session ☐ Other, Explain:			
8. Is your employer a business or trade association or similar organization which lobbies on behalf of its members? If "yes," attach a list showing the name and address of each member who has paid the association fees, dues or other payments over \$500 during either of the past two years or is expected to pay over \$500 this year.			
No Yes. However, no member has paid, pays, or is expected to pay over \$500.			
Yes. The list is attached			
9. Does your employer have a connected, related or closely affiliated political action committee which will provide funds for you to make political contributions including purchase tickets to fund raising events? If so, list the name of that political action committee.			
Yes. Name of the committee is: 10. If lobbyist is a company, partnership or similar business entity which employs others to perform actual lobbying duties, list name of each person who will lobby. (See WAC 390-20-			
143 and 144 for instructions.)			
	T = .		
11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:	Remarks:		
CODE SUBJECT CODE SUBJECT			
01 ☐ Agriculture 09 ☐ Higher education 02 ☐ Business and consumer affairs 10 ☐ Human services			
03 Constitutions and elections 11 Labor			
05 Energy and utilities 13 Local government			
06 ☐ Environmental affairs - natural 14 ☐ State government resources - parks 15 ☐ Transportation			
07 ☐ Financial institutions and insurance 16 ☐ Other – Specify:			
08 ☐ Fiscal			
CERTIFICATION: I hereby certify that the above is a true, complete and correct statement. EMPLOYER'S AUTHORIZATION: Confirming the employment authority to in this registration statement.		Confirming the employment authority to lobby described	
12. LOBBYIST'S SIGNATURE DATE	EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE DATE		